## AUTHORIZED UTILITY REPRESENTATIVE FORM FOR TELECOMMUNICATIONS CARRIERS [] Wireless 2012.39 A []CLEC []ILEC TYPE: [X] IXC

TYPE:	[X] IXC [ ] CELCO		0016.01
	CERTIFICATED COMPA	NY INFORMATION	
<u>Legent Communications</u> Company Name	Corporation	FEIN/SSN	
ompany Name		949-753-7000	
)ba/fka		Telephone #	
.07 W Michigan 4th Fl			
Mailing Address			
Kalamazoo MI 49007			
City, State, Zip Code			
21084 Bake Pkwy Ste 1	.0880.		
Business Location	,	Orange	
Lake Forest CA 92630		County	
City, State, Zip Code		T INFORMATION	-CHIVED
	REGISTERED AGEN	IT INFORMATION	RECEIVED
Registered Agent: <u>B Allston</u>	Moore Jr	· · · · · · · · · · · · · · · · · · ·	100 0 8 1936
Mailing Address: <u>5 Exchange</u>	St		PSC SC MAIL / DMS
City, State, Zip Code: Charles	ston SC 29401		(A)1
A. Tom Kluksdahl  General Manager (Include a	ddress if different than above.)  / 949-753-7267  Facsimile Number	rint or type company contact for type contact for type company contact for type contac	
Telephone Number			
B. Customer Relations /Compl	aints Representative (Include	address if different than above.)	tcom com
949-753-7000 Telephone Number	/ 949-753-7267 Facsimile Number	/ requlatory@legen E-mail Address	CCOM.
C1	aints Representative for Esca	lated Complaints (Include addre	ss if different than above.)
	1 949-753-7267	/ regulatoryereges.	tcom.com
949-753-7000 Telephone Number	Facsimile Number	E-mail Address	
C2. <u>866 - 469 - 0829</u> Customer Contact (Toll Free	e Number)		
D	nclude address if different than	above.)	
Engineering Operations (II	ILIUUG auuress ii umorome siam		
Telephone Number	Facsimile Number	E-mail Address	
·	•		
E. Test and Repair (Include a	ddress if different than above.)	<del></del> :	
	1	/ E-mail Address	
Telephone Number	Facsimile Number	L-man Addioso	Page 1

	Emergencies (During non-	Emergencies (During non-office hours)				
			1			
	Telephone Number	Facsimile Number	E-mail Address			
<u>ldi</u>	ition, please provide the follo	wing company contact inform	mation to assist in proper routing of correspondence and invoices:			
	Scott White		; · · · · · · · · · · · · · · · · · · ·			
	Regulatory Officer (Include address if different than above.)					
	949-753-7000	/ 949-753-7267	7 / regulatory@legentcom.com E-mail Address			
	Telephone Number	Facsimile Number	E-mail Address			
	Dual Party Mailings (Nam	e)				
	Mailing Address					
	Telephone Number	Facsimile Number	E-mail Address			
	Interim LEC Fund Mailings (Name)					
	Mailing Address	1				
	Telephone Number	Facsimile Number	E-mail Address			
	Patrick D Croc	ker				
	Universal Service Fund Mailings (Name)					
	107 W Michigan 4th Fl, Kalamazoo MI 49007					
	Mailing Address 269-381-8888	/ 269-381-4855	/contact@nationwideregulatorycompliance			
	Telephone Number	Facsimile Number	E-mail Address			
	Patrick D Croc					
	Gross Receipts Mailings (Name)					
	107 W Michigan 4th Fl, Kalamazoo MI 49007					
	Mailing Address 269-381-8888	/ 269-381-4855	/contact@nationwideregulatorycompliance			
	Telephone Number	Facsimile Number	E-mail Address			
	Lifeline Mailings (Name)					
		:				
	Mailing Address	1	1			
	Telephone Number	Facsimile Number	E-mail Address			
	Dataial D. Car-	kor				
	Patrick D Croc This form was completed by President, Nat		Signature			
	Regulatory Com	pliance, LLC	03/28/12 Date			
	Title	9	. Date			
	RETURN COMPLETED FOR	RM TO:				
	Public Service ( Clerk's Office	Commission of SC	Office of Regulatory Staff Attn: Jeanne Gordon			

1401 Main Street, Suite 900

Columbia, South Carolina 29201

Post Office Drawer 11649

Columbia, South Carolina 29211

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